HUNTER SAFETY AFFIDAVIT

Inland Fisheries and Wildlife, 284 State Street, Sta. 41, Augusta, Maine 04333

Instructions: Type or Print clearly, completing all blanks down to the dotted line. Circle the number of the paragraph that applies to your situation and fill in the blanks within the paragraph. Date and sign the statement in the presence of a notary. The notary should complete the section below the double solid line.

Name		
Complete Mailing Address	58	
Physical Address		
Home Telephone	Business Telephone	Date of Birth
As the abo	ve named individual, I duly swear to t	he following:
	(approximate date) I s	
	irearms hunter safety course. b. archery saf	
d. crossbo	ow safety course in the state of	·
2. I have he	ld at least one adult firearms hunting licen	sa singa January 1 1076. The license
	Id at least one adult firearms hunting licen d by the state/province of	· ·
was issue	d by the states province of	In the year of
3. I have he	ld at least one adult archery license since J	anuary 1, 1980. The license was
issued by	the state/province of	in the year of
	ld at least one adult trapping license since	
issued by	the state/province of	in the year of
5 I have he	ld at least one adult crossbow license since	January 1. 1980 The license was
	the state/province of in the y	· ·
Ž		
	that the above information may be checked	•
completing t	this affidavit may result in my prosecution for	or false swearing which is a Class D crime.
Date	Signature	
	<i>C</i>	
State of Maine,	County of	_ , SS.
• • •	red before me the above named affian he foregoing is true.	t who signed above in my presence,
Date	Notary/Attorney	